

Axiom Cost Accounting and Decision Support 2018.1

Release Notes

Last Updated: 5/14/2018

KaufmanHall

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Version: 2018.1.2

Updated: 5/14/2018

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Summary

Kaufman Hall is pleased to announce the 2018.1 release of Axiom Cost Accounting and Decision Support. Each product release provides new features, enhancements, and configuration options to meet your needs. Many of these features and enhancements are a direct result of your feedback and suggestions.

Summary of the upgrade process:

- 1. **Review product release notes** Review this document to familiarize yourself with the new features and functionality.
- 2. Schedule an installation date Contact support@kaufmanhall.com or your implementation consultant, and they will confirm an installation period with you.
- 3. Back up Axiom database Kaufman Hall will confirm that you have a current backup of your Axiom database before applying the upgrade.
- 4. **Apply upgrade** Arrange with your IT staff on an agreeable time for scheduled downtime to apply the program and product upgrade. This includes any post-upgrade hot-fix files that need to be copied into the system to address any post-release known issues that have been resolved.
- 5. **Complete manual updates** After installing the upgrade, if needed, review any manual setup steps needed to enable features for this version.

Support

As always, we appreciate your support of Kaufman Hall and look forward to continuing to meet your financial management needs. If you have any questions about your upgrade, contact Kaufman Hall Software Support at 1-888-543-6833 or support@kaufmanhall.com.

Training

Kaufman Hall offers multiple training options for our customers. These courses are part of your maintenance agreement and are free of charge. We strongly urge you to take advantage of all training options, including:

- Self-help videos
- Recorded webinars
- Virtual training courses

For a complete listing of our courses, please visit www.kaufmanhall.com.

Product upgrade notes

IMPORTANT: Apply this update ONLY if you have already applied the 2017.3 (November 2017) release and completed all the manual setup steps from the corresponding release notes.

When upgrading to the 2018.1 version of Axiom Cost Accounting and Decision Support, keep in mind the following:

- This product upgrade contains new tables, columns, updated templates, reports, scripts/imports and remediated defects.
- KHA delivered reports may be replaced. Any report that you saved under a different name or created new will remain untouched. Replaced reports are available in Document History, if needed.
- Any KHA delivered report that you moved to a new location since the last upgrade will automatically move back to its original location.
- KHA product templates and calculation method libraries will be replaced.
- Product task panes will be replaced.
- Process definitions will not be replaced.
- Security roles and sub-systems will be reset to their configured settings. All user security exceptions you may have made will remain intact.
- Specific items configured as part of your company or organization's implementation such as imports, exports, driver files, and process management files, will remain as is. Any required modifications to these areas are covered in the release notes, if required.

New features summary

This section includes a summary of the new or updated features for this release:

Service Line Analytics Dashboard

The Service Line Analytics Dashboard provides data visualizations for inpatients by service line and by DRG in an interactive manner. Core utilization measures such as cases and ALOS are combined with financial measures of revenues, deductions, direct costs, indirect costs, and margins and can be viewed in total or by an average per case basis. Payer mix and top physician information is also available.

The dashboard includes four main areas:





Volume – Provides comprehensive insight into the types of cases that drive revenue and consume resources.



Revenue – Shows a breakdown of where the reimbursement is coming from so that changes can be noticed early.



Cost Analysis – Offers a picture of which direction costs are going from one period to the next to identify trouble spots.



For instructions, see the following:

- Configuring the Service Line Dashboard (page 18)
- Using the Service Line Analytics Dashboard (page 19)

Professional billing added to reports

You can now report on gross, net revenue, cost, and margin using a series of new reports designed specifically for clients with medical group data. These new reports provide utilization and profitability information at the CPT service level, which improve the ability to compare physician performance across medical groups and to analyze care across the care continuum.

The new Professional Billing Reports include the following:

- Margin Analysis report
- Professional Utilization Department Analysis report

The Margin Analysis report has also been enhanced to allow you to include a third level row definition for grouping and subtotalling.

For instructions, see the following:

- Using the Margin Analysis report (page 22)
- Professional Utilization Department Analysis report (page 23)

Axiom advanced filters

The Axiom Filter Wizard has been enhanced to support advanced limit queries, which greatly simplifies the building of limit filters. Advanced limit filters are critical in identifying specific patient populations or defined sets of encounters for analysis. These advanced limit filters can also be named and saved in the filter library.

A filter library has also been added so users can create named filters and store them for reuse. This improves efficient use of the decision support system and also helps ensure consistent results when reporting across the enterprise by using the same defined filters.

The ability to limit encounters for many reports has been added to most Decision Support reports as a new Refresh Variable.

(1) Filter V	Vizard			X		×
Define cr	iteria for the filter, based on ta h PrimaryService	able Clinical	CoreMeas = <>	Search Q (no value) Allergy and Immunology	×	
	ServiceLine2 ServiceLine3 ServiceLineLastUpdated BillType RillStatue	Ţ		Breast Health Burns - Medical Burns and Wounds Burns Cancer - Medical Cancer - Surgical	Ŧ	
Preview			TAN		Þ	×
Filter Back	{limit=Encounter.Encounter where=Encounter.ServiceLin	Seq; select= ne1 IN ('Aller	ClinicalCo gy and In	oreMeasure.EncounterSEQ.EncounterSeq; nmunology', 'Breast Health');}	Cance	*

For instructions, see Using the Advanced Filter Wizard (page 25).

Performance improvements

Performance has been improved for both Axiom Decision Support reporting and for certain key Axiom Cost Accounting processes such as cost assignments to encounters and reconciliation reporting. Certain performance improvements include new indexing methods and capabilities. These new indexing methods also reduce the database size.

IMPORTANT: On-premise clients must upgrade to the recommended SQL Server version to leverage certain performance improvements. All on-premise systems should use SQL 2016 Enterprise to be compliant.

Contract Management uses Microsoft Azure

Axiom Contract Management now uses the Microsoft Azure SQL database and integrates with certain Axiom Platform features.

Issues resolved in 2018.1

The following table lists the resolutions for issues addressed in 2018.1, released on April 2, 2018:

Issue Description	Resolution
AllocDeptAssignment: Issues bucket (2017.3) [TFS 15585]	Symptom: Several issues were identified in this work item: Workbook does not load refreshed. Refresh variables are not always cleared. Need to add a header label to [InsertCMColumn]. Control_Sheet is out of date.
	Resolution: Updated the header label for InsertingCMColumns, updated the control sheet to take advantage of new settings, updated refresh variables.
RCU Method calculation issues [TFS 14442]	Symptom: There are no Print range definitions established for this Validation workbook. Resolution: Added Print Ranges.
PFB-05995 - Overlapping allocation and reclass ID values causing accidental deletion of results [TFS 17937] [TFS 21274] [TFS 21282] [TFS 21309]	 Symptom: During the deletion of prior allocation data, the overlap of allocation and reclass IDs may cause one to delete the posted results of the other. Resolution: Corrected by including the allocation or reclass type designation from the ACCT table when looking for records to update.
PFB-05981 and PFB-06100 - Cost Accounting: Error adding custom column to DSSEncounter Data [TFS 17597] [TFS 18726]	 Symptom: User cannot add a custom column to any of the tables in the DSSEncounter Data folder. Resolution: Table Type definitions are case sensitive. Updated the Table Type definition for the key field from "EncounterSeq" to "EncounterSEQ".
PFB-06007 - Direct to Encounter form – long load times [TFS 18046]	 Symptom: In large client systems, it may take a long time for the form to load. Resolution: Made multiple changes to the AQs on the form to improve performance for large clients.
PFB-06073 - Dept Allocation Processing Divide by Zero Error [18430]	 Symptom: When the monthly CGL variable percentage data is such that the monthly weighted percentages total to 0, a divide by zero error occurs when running department allocations. Resolution: Added case logic to the SQL to trap the error when calculating the variable percentage rate.
PFB-06075 - COSTPOOL.RESOURCECLASS missing lookup to ResourceClass.ResourceClass [TFS 18508]	 Symptom: Reports that filter on Costpool.ResourceClass fail because of missing lookup to the ResourceClass table. Resolution: Added the lookup on the field Costpool.ResourceClass to ResourceClass.ResourceClass.

Issue Description	Resolution
PFB-06092 - Inpatient Period Comparison - Descriptions being cut off [TFS 18721]	Symptom: Description: Formed report to allow full descriptions to be shown. Currently cut off on the left part of the screen.
	Resolution: Corrected by updating several columns to prevent descriptions from cutting off on multiple pages.
PFB-06093 - Inpatient Summary Analysis - Incorrect Data & Variables Issues [TFS 18818]	 Symptom: The following issues were discovered in this report: 1. Direct and Indirect Expenses are not presenting properly. The expenses are overstated and higher than other reports for the same set of encounters.
	 There is a selection in the filter prompt for either Actual or Estimated Reimbursement. When selecting Estimated Reimbursement, the Actual Reimbursement results still populate.
	3. Set Formation Average Length of Stay to two decimal places for all columns in that section.
	Resolution: The following are the resolutions for the issues listed above:
	1. Corrected by properly setting the Row Filter on the Expense rows.
	2. Corrected by changing cell J56.
	 Corrected by ensuring ALOS row 50 was set to a consistent Grp Rcd (0.00) style.
PFB-06094 - Population Trends - Multiple	Symptom: The following issues include:
formatting issues [TFS 18722]	1. Set some variance and pct columns to a larger width.
	2. Format ALOS columns to include two decimal places.
	 IP column Headers do not show in full or at all. Need to see full header names.
	 When selecting the Cost Per Case View in the IP tab, it would be helpful to still see the cases columns to aid in review and use.
	Resolution: Corrected by updating several columns and cells.

Issue Description	Resolution		
PFB-06095 - Service Line Inpatient Period Comparison - Incorrect total [TFS 18819]	 Symptom: The following issues were discovered in this report: 1. The Grand Total Line on Report does not calculate correctly for the ALOS column. 		
	 Values in subtotal lines are centered, but the detail is not (or vice/versa). 		
	3. ALOS needs to have decimal points.		
	Resolution: The following are the resolutions for the issues listed above:		
	1. Corrected by updating the ALOS formula in the total row.		
	2. Corrected by updating the formatting.		
	3. Corrected by updating the formatting.		
PFB-06096 - Payor Analysis - ALOS	Symptom: ALOS columns should have decimal points.		
formatting [TFS 18724]	Resolution: Corrected by updating Report!Z10, AA10 and AB10 to 2 decimal places number formatting and Report!AB57 formatting to 2 decimal places.		
PFB-06097 - Key Performer Inpatient Period Comparison - Incorrect data [TFS 19623]	Symptom: The report does not select the Top 10 Providers when run by Attending Provider name. It selects the Top 10 Alpha providers. Also, ALOS columns should have decimal points.		
	Resolution: Corrected by updating the Limit Query Filters to pull the correct data, then used sheet sorting to sort the rows. Also updated ALOS to 0.00 style.		
PFB-06156 - EncounterPrimary Field Length - Staging [TFS 19224]	Symptom: The EncounterPrimary field in the EncounterStaging table has a length of 20 while the EncounterPrimary field in the final destination table of Encounter has a length of 50. This causes issues for clients when uploading imports that were previously working. Resolution: Corrected by setting the length in the EncounterStaging table		
	to 50.		
PFB-06180 - Allocation by Dept: CostAdjustmentID Issue [TFS 19640]	Symptom: When the Allocation by Dept utility is run, it updates the ACCT record with the value 9001 in the CostAdjustmentID column rather than with the expected StepID.		
	Resolution: Corrected by updating the portion of the code that writes the CostAdjustmentID to the ACCT record to use the StepID.		
PFB-06082 - ProviderRVU Calculation Times Out [TFS 18509]	Symptom: ProviderRVU calculation would take an exceptionally long time to process.		
	Resolution: Corrected a join in one of the transform steps that significantly boosted performance.		

Issues resolved in 2018.1.1

The following table lists the resolutions for issues addressed in 2018.1.1, released on April 23, 2018:

Issue Description	Resolution
PFB-06353 - RCC Utility Defect [TFS 21699]	Symptom: During the costing process, we identified a variance that may occur under certain circumstances between amounts that posted back to the CGL as an allocation offset compared to what posted to Cost Results. The amounts used in the Cost Results were correct for the RCC method. Resolution: Corrected by changing transform step 28 from an internal join type to a left join type on the CostingRCC_ ChargeTotalsByDepartment table. This ensures that the parent department without cost activity is included in the CGL update.
PFB-06369 - Reclass Offset Posting without Basis [TFS 22741]	 Symptom: It was identified that the CGL had Reclass offset entries but no Reclass entries. Further investigation confirmed that any Reclass rule processed that does not have a basis may post a Reclass offset, but does not post a reclass to the CGL. This was found to be true in all Reclass types: Payroll, Account, OOR, and Dept. Resolution: Corrected by adding a new transform to confirm proper treatment of the reclasses for both the initial reclass and the resulting offsets.
PFB-06411 - RVU Processing using ItemType [TFS 22651]	Symptom: When there is a CostItem with a CostRVU.ItemType = 'NA', the system does did assign that RVU to all matching cost items except those that have an ItemType match that is specifically defined in the CostRVU table. Resolution: Corrected by updating the formula in cell O14.

Issues resolved in 2018.1.2

The following table lists the resolutions for issues addressed in 2018.1.2, released on May 14, 2018:

Issue Description	Resolution
2018.1 Patch - CA/DSS: RVU Import [TFS 23928]	 Symptom: The RVU import does not use the RVU version selected for the Cost Set. For example, using Cost Set 201812 and set up to use method version 201712 and RVU version 201712. When processing the RVUs, the import uses the {varServiceEndYRMO} and not the selected RVU version. Resolution: Corrected by making the following changes: Added new transform step #9 that establishes the RVUVersion variable. Altered transform step #28 by replacing the predicate "rvu.yrmo = {varServiceEndYRMO}" with "rvu.yrmo = {varRVUVersion}" affecting three SQL statements.

Manual setup instructions

There is one manual setup or configuration instructions required for this release.

Setting the DSSPtType in the PTTYPE reference table

A new field has been added to the PTTYPE reference table that requires set up before using the decision support reporting. This new field, DSSPtType, has been established to help identify and differentiate the different types of encounters that may be loaded into a system. This is a validated field.

The four available options are: IP, OP, PB, and NA. Mapping the defined customer patient types into one of these categories is required to make sure the encounters are reflected appropriately in the reports.

To set the DSSPtType in the PTTYPE reference table:

1. In the Explorer task pane, navigate to Table Library > DSS > Reference, and click the Reference folder, and then double-click the PTTYPE table.



- 2. Map the existing Patient Types to one of the valid options in the **DSSPtType** column to determine how those patients should display in the reports. Options includes:
 - IP for inpatients
 - OP for outpatients
 - PB for professional billed encounters
 - NA

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H8	H8)				
	A		В	CI	2	F	G	Н	I
- 3									
4		Data T	уре	Str	ing	String	String	String	
5		String	Length	5	5	5	5	50	
						patient	level		
						type for	patient		
						summary	types for		
6		Descri	ption			reports	reporting		
8		Delete	Row	PtT	vni 🔻	P1Type	P2Tvp(🔻	DSSPtTvp(-	
9		Delete	11011	E	<u>, 15</u>	OP		OP	
10				EP		OP		OP	
11				EV		OP		OP	
12				I		IP		IP	
13				IP		IP		IP	
14				NA				NA	
15				0		OP		OP	
16				OP		OP		OP	
17				ov		OP		OP	
18				PB		РВ		PB	
19				S		OP		OP	
20				SP		OP		OP	
21				SV		OP		OP	
H •									

3. Save the changes by right-clicking the **PTTYPE** tab, and click **Save Data to Table**.

Operating instructions

This section includes instructions on how to use the new and updated feature for Axiom Cost Accounting and Decision Support for release 2018.1.

Configuring the Service Line Dashboard

NOTE: Before configuring this feature, complete the steps in Setting the DSSPtType in the PTTYPE reference table (page 16).

Before anyone can use the Service Line Dashboard, you must first set the current period in Axiom Decision Support. The DSS Calendar setting is used in the dashboard as a default upon opening the dashboard. This setting is generally set to the most recent month for which encounter data has been loaded and for which costs have been assigned. We recommend that you change it as the system is updated with new data.

The DSS Current Period and Year dialog displays the current calendar year and month set up in the system as well as the current system information.

4	DSS Current Period and Year X					×			
	Set DSS Current Period and Year								
	Use this form	to change th	e Current C	alendar Year a	nd C	Current Calendar Month.			
ſ	Current Caler	ndar Info:				Select New DSS Cale	endar Optio	ns	
	Calendar Da	te Fiscal P	eriod(s)	Fiscal Year					
	Jul-2017	1-	10	2017		New Calendar Year:	2017	•	
	Current Syste	m Info:				New Calendar Month:	7	•	
	Current Syste	an ino.							
			Calender	Calender					
	Period	Year	Period	Year					
	10	2017	7	2017					
L						·	Close		
		4	•				Close	:	

To configure the Service Line Dashboard:

1. In the DSS Admin task pane, in the Decision Support Imports and Data Maintenance section, double-click Set DSS Current Period/Year.

Decision Support Imports and Data Maintenance

- Set DSS Current Period / Year
- Dimension Maintenance
- Reference File Imports
- Q Reference Table Maintenance
- Q Patient and Encounter Data Imports
- Q Cost Data Import, Assignment and Summarization
- Q Reconciliation Reports
- 2. In the DSS Current Period and Year dialog, do the following:
 - a. From the New Calendar Year drop-down, select the current calendar year.
 - b. From the New Calendar Month, select the current calendar month.
- 3. Click Close.

Users can now use the Service Line Dashboard. For more information, see Using the Service Line Analytics Dashboard (page 19).

Using the Service Line Analytics Dashboard

The Service Line Analytics Dashboard includes data grouped into four main areas:

- Summary Provides an overview of important financial indicators.
- Volume Provides comprehensive insight into the types of cases that drive revenue and consume resources.
- **Revenue** Shows a breakdown of where the reimbursement is coming from so that changes can be noticed early.
- **Cost Analysis** Offers a picture of which direction costs are going from one period to the next to identify trouble spots.

IMPORTANT: Before you can use the Service Line Dashboard, your Axiom Decision Support Administrator must set the current year and month for your organization. For more information, see Configuring the Service Line Dashboard (page 18).

To use the Service Line Analytics Dashboard:

1. In the DSS Admin or DSS Reporting task panes, in the Service Line Dashboards section, double-click Summary, Volume, Revenue, or Cost Analysis.

TIP: You can access all of the report tabs once you are in the dashboard. The options in the task pane are simply shortcuts to a specific area of the report.

Service Line Dashboards
 Inpatient Service Line Analysis
 Summary
 Volume
 Revenue

- Cost Analysis
- 2. To filter the information in the report, click the funnel icon in the upper left corner of the screen.



- 3. In the filter sidebar, configure any of the following to determine the time period for the dashboard and other settings, and click **Apply**:
 - **Current DSS Period Selection** Select the period in which to view the data. The dashboard uses the Current Month from the DSS Current Month setting as a default. This monthly setting defines the Current Quarter and the Current Year as well.
 - Select a different period Click the check box to select a specific month, quarter, or year in which to view the data, and select the new period from the drop-down.

TIP: Selecting the Current Month, Current Quarter, or Current Year using the radio buttons drives the different period time frames. Click each button to see that the **Select a Different <Period>** changes accordingly.

 Comparison Method (Excludes Summary) - Select whether to compare the current or previous year's data.

TIP: This configuration setting allows you to compare year over year. For example, December 2017 with December 2016 or the previous period December 2017 with November of 2017.

 Select How Net Revenue is Calculated - Select whether to calculate net revenue as combined, actual, or estimated.

TIP: The **Combined** option is a way of using Actual Payments when available and Expected Payments when Actual Payments are not available.

• Select a Service Line to View - Select a service line, which is optional multi-select filter.

• Select a set of DRGs to View - Select a DRG, which is an optional multi-select filter.



4. In the upper right corner of the screen, click **Show Data** and **Show Graphs** to alternate between viewing the actual data and its graphical representation.



IMPORTANT: The Service Line Dashboard uses the Encounter.ServiceLine1 column in the Encounter Table to present information. Future enhancements to this dashboard are planned that will make it more flexible to use other service line definitions. Additionally, the Service Line picklist for the Dashboard is driven from the Services Reference table. It will need to be populated with the ServiceLine1 values. It may be possible to select a Service Line and date combination for which an encounter does not exist.

Using the Margin Analysis report

The Margin Analysis report provides a highly flexible view of encounter data and performance. It has multiple refresh variables and also allows you to determine the row or group and sum by levels. It includes case counts and core financial measures such as gross charges, net revenue, cost, and margin information.

There are three important changes to this report in this release:

- 1. A new Professional view has been added to include the professionally billed encounters (DSSPtType = to PB) separate from the previous Outpatient view.
- 2. An optional third-level row definition for grouping and subtotaling has been added.
- 3. The new Advanced Filter has been added as an additional Refresh Variable option.

To use the Margin Analysis report:

- 1. Navigate to one of the following:
 - DSS Admin task pane: In the Decision Support Reporting section, click Patient Analysis, and double-click Margin Analysis.

Decision Support Reporting	^
👻 퉬 Patient Analysis	
🖾 Cost Category Expense Analysis	
🔊 Inpatient Period Comparison	
Inpatient Summary Analysis	
Margin Analysis	

• DSS Reporting task pane: In the Patient Analysis Reports section, double-click Margin Analysis.



2. In the **Refresh Variables** dialog, use the following table to select the variables to include in the report, and click **OK**.

Variable	Description
Admit or Discharge Date	Select whether to populate the report based on encounter admit or discharge date.

Variable	Description
Actual or Estimated Net Revenue	Select the source for the Net Revenue, either from Total Estimated or Total Actual Payments. This option drives the Margin calculation to either based on Estimated Margin or Actual Margin.
Select Current From	The Year and Month to begin the Admit or Discharge period of this report.
Select Current To	The Year and Month to end the Admit or Discharge period of this report.
Select Primary Group By	The Primary Group By defines the rows in the report and determines how the Encounters and associated measures are grouped or totaled. One group by measure is required. The group by alternatives are determined by the DSSBreakFields table.
Select Secondary Group By (optional)	After you define the Primary Group By, on optional Secondary Group By is available to be selected. This allows you to add an additional row definition to the report.
Select Third Group By (optional)	If you define a Secondary Group By, an optional Third Group By is available to be selected. This allows you to add an additional row definition to the report.
Limit Encounters	To remove a limit encounters filter, on the Report sheet, simply double-click the Limit Encounters filter, and then click Apply. For more information about the Advanced Filtering capabilities, see Using the Advanced Filter Wizard (page 25)

- 3. To select a different view, in the Main ribbon tab, click Change View, and select one of the following:
 - Inpatient
 - Outpatient
 - Professional
 - Combined

Professional Utilization Department Analysis report

The Professional Utilization Department Utilization Analysis report analyzes the utilization of a population by Department, Provider, and Cost Item.

Refresh Variables

The following table describes the variables you can configure for this report:

Variable	Description
Report Filter Group	The column from the Encounter table to filter the report.
Report Filter	The element in the Encounter column to filter the entire report data.

Variable	Description			
Select Entity	Select the entity to display in the report.			
Select Payment Option	Select Actual or Estimated to determine what values to use for net patient revenue and the resulting margin to be calculated in the report.			
Select Date Option	Select the date to use to determine whether to populate the report based on encounter admit or discharge date.			
Load Detail	Determine if a Department summary is desired or the Cost Detail is to be used in the report			
Current From	The Year and Month to begin the Admit or Discharge period of this report.			
Current To	The Year and Month to end the Admit or Discharge period of this report.			
Limit Encounters	To remove a limit encounters filter, on the Report sheet, simply double-click the Limit Encounters filter, and then click Apply.			

Report Options

The following table describes the options available for this report:

Option	Description
Report Filter Group	Select the column from the Encounter table to filter the report
Report Filter	Select the element in the Encounter column to filter the entire report data
Group by Options (rows)	Admit or DischargeService LineEntity
Measure Options	Months to aggregate data to specific months, quarters and years in Fiscal and Calendar Years, depending on the selection
Views	Department Totals, Provider Totals, Cost Item Detail, Department Totals by Cost Category, Provider Totals by Cost Category, Cost Item Detail by Cost Category, All
Quick Filtering	Yes – From the !Dimensions, Costing, or DSS folder
Drills	No
Printable	Yes

Report Example

Using the Advanced Filter Wizard

As part of the Refresh Variables, you can use or create your own filters to customize the data to include in the report. The Advanced Filter Wizard walks you through the process of building complex limit query filters rather than having to construct them manually. You can create and save new filters for future use as well as use and edit existing filters.

Refresh Variables		\geq
Select Report Filter Group		^
Choose a value for DSSBreakField.	ioose Value	
Select Report Filter		
Ch	oose Value	
Select Entity(s) for Review (optional)		
Choose a value for ENTITY. Choose	e Value 🗙	
Select Payment Option (for Margin Calculations)	
 Actuals Estimated 		
Select Date Option to Use?		
○ Admit ○ Discharge		
Load Detail		
\bigcirc Summary - Dept Level ONLY \bigcirc Detailed - Dept, Provider, and Cost Item Levels		
Select Current From		
Choose a value for YRMO.	oose Value	
Select Current To		
Choose a value for YRMO.	oose Value	
Limit Encounters (optional)		
Select or Build a Query to Limit Encounters Select	ect Filter 🗙	~
Enter a value for 'Select Report Filter Group'		
OK	Cancel	

To use the Advanced Filter Wizard:

- 1. In the Refresh Variables dialog, in the Limit Encounters field, click Select Filter.
- 2. In the Filter Wizard dialog, select the primary table for the filter, and click OK.

TIP: Use the Search field to narrow down the list of primary table names.

Search		Q
III ClinicalCoreMeasure		
III ClinicalMeasureData		
ClinicalPatientSatisfaction		
CMSEncounterCalculations		
→ CostDetail		
CostDetailCategoryCalculation		
III DeptUtilizationSummary	4	
Enc_CPT		
III Enc_Diag		
III Enc_Payment		
III Enc_Payor		
THE End. Proc		

3. Do any of the following:

Using an existing filter

a. Next to the Preview field, click the folder icon.

B	Х	C

b. In the Filter Library dialog, select the filter to use, and click OK.

TIP: You can edit an existing filter by selecting a filter and following the steps in **Creating a filter** below.

- c. In the Filter Wizard dialog, click Apply.
- d. Click OK.

Creating a filter

a. In the left side of the dialog, select the table column on which you want to base the filter.

After you select a table column, the values in that column display in the right side of the dialog.

eilter Wizard			×
Define criteria for the filter, based on	table ClinicalCoreM	leasure	
Search	Q ×	Search	Q ×
PrimaryService ServiceLine1 ServiceLine2 ServiceLine3	▲ = <:	 (no value) Allergy and Immunology Breast Health Burns - Medical Burns and Wounds 	A
ServiceLineLastUpdated BillType PillStatus		Burns Cancer - Medical	•

b. In the right side of the dialog, type or select the value on which to base the filter.

You can type into the field above the list of values to filter the list or to specify a value. If one or more values are selected, then those items are used in the filter. Otherwise, whatever you type into the field is used by the filter.

c. In the space between the two selection boxes, select the operator to use for the filter criteria statement, such as equals, not equals, greater than, or less than.

Ø Filter Wizard			>
Define criteria for the filter, based on table Cli	inicalCoreMeas	ure	
Search Q	×	Search	Q X
PrimaryService ServiceLine1	▲ = <>	 (no value) ✓ Allergy and Immunology 	A
ServiceLine2	Ĩ	Breast Health	
ServiceLine3 ServiceLineLastUpdated	1.1	Burns and Wounds Burns	
BillType	•	Cancer - Medical	•

d. Review the filter criteria statement in the **Preview** box to ensure that it is as intended. If you need to make changes, edit your selections made above.

Search	Q	×		Search	×
PrimaryService ServiceLine1 ServiceLine2 ServiceLine3 ServiceLineLastUpdated BillType		•	=	 (no value) ✓ Allergy and Immunology ✓ Breast Health Burns - Medical Burns and Wounds Burns Cancer - Medical 	•
Encounter.ServiceLine1 IN	('Allero	▼ av and	Immunol	Cancer - Surgical	

- e. Do one of the following:
 - If the filter criteria statement is finished, click **OK**. The Filter Wizard uses the statement in the Preview box (you do not have to click **Apply** in this case).
 - To create a compound filter, click **Apply** to move the current criteria statement into the **Filter** box. Then, repeat Steps a-d to create another criteria statement. When the next statement is complete, click **AND** or **OR** to join it to the prior statement.
- f. To save the filter, click the disk icon next to the **Apply** box.

ilter W	Vizard			k	
Define cr	iteria for the filter, based on ta	able Clinical	CoreMeas	sure	
Searc	h PrimaryService ServiceLine1 ServiceLine2 ServiceLine3 ServiceLineLastUpdated BillType RillStatue	Q X	= <>	Search Q (no value) Allergy and Immunology Breast Health Burns - Medical Burns Gancer - Medical Cancer - Surgical	*
Preview		▼Apply			6
Filter	{limit=Encounter.Encounter where=Encounter.ServiceLi	Seq; select= ne1 IN ('Aller	ClinicalCo gy and In	preMeasure.EncounterSEQ.EncounterSeq; munology', 'Breast Health');}	
Back				ок	Cancel

- g. In the File name field, type a name for the filter.
- h. In the **Description** field, type a description of what the filter does.
- i. Click Save.
- j. In the Filter Wizard dialog, click **OK**.

Known issues

The following table lists the known issues in this release:

Issue Description	Explanation
PFB-05470 - Encounter.CostLastUpdate field is a String [TFS 12511]	Symptom: Clients that want to load cost information at the Encounter level and move a date field into this column may experience problems loading data.
	Explanation: This field stores the date for the last time the costs were updated. It was designed to be an internal field and used by the costing utilities, thus the format of the date could be controlled and fit within the 15-character string size.
	If a true date and time is needed during a load process, use a custom field in the EncounterCustom table.
PFB-06236 - CostVarPct Reclass [TFS 20222]	Symptom: The system does not calculate CostVarPct from the weighted averages in a way that produces a result between 0 and 1 in all circumstances.
	Explanation: This field is calculated using the weighted averages of the aggregated accounts being reclassed. However, under certain circumstances the calculation does not resolve back to a value between 0 and 1.
PFB-06193 - Department and Allocation Department Summary - OOR/RevReclass Issue [TFS 20479]	Symptom: A client wants to allocate patient revenue as if it were other operating revenue, but does not want to change its classification from patient revenue.
	Explanation: The system is designed to only allow the distribution of other operating revenue. If a client wishes to distribute patient revenue as if it were other operating revenue, then the only option is to reclassify it in FSSummary as other operating revenue until this issue is resolved.
PFB-06194 - Cost Category Expense Analysis [TFS 22333]	Symptom: In the Refresh Variables dialog, you select Actual for Net Revenue, but the report displays Estimated Net Revenue.
	Explanation: A reference is looking at the wrong cell to determine if the row should say Actual or Estimated. The values are still actual, as selected in the Refresh Variables, but the label is incorrect.
PFB-06422 – Costing Defaults Driver [TFS 23220]	Symptom: During the client initial setup, one may experience difficulty in setting up the default Cost Method due to the Costing Defaults driver miss the word "Code" in cell A1.
	Explanation: Open the CostingDefaults driver, and navigate to cell A1. Type the work "Code" and save the file.

Issue Description	Explanation
PFB-06427 - Reclass Input Manual Statistics [TFS 23433]	 Symptom: The drop-down in the refresh variables does not include the last CGLyyyy table in your system. Explanation: The variable range is not correctly selected in the refresh variable cell that controls the lookup to the valid CGL tables in the system, resulting in the one at the bottom of the list to be omitted from the drop down selection. The current workaround is to copy the utility and add a row for CGL2018 on the RefreshVariables tab, then refresh the file.
PFB-06475 - A Calculation Utility is creating miscellaneous variance [TFS 23434]	 Symptom: After running the RCU calculation, several departments may contain small variances of approximately \$1. The variance is always small and immaterial. Explanation: Issue being investigated. Explanation will be made when issue is resolved.

IMPORTANT: Refer to the **Axiom Healthcare Suite 2018.1 Release Notes** for additional known issues that have a suite-wide impact.